



Confirmation No. 4213

CERTIFICATE OF MAILING

I hereby certify that the following correspondence was deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on September 16th, 2004.

1450, Alexandria, VA 22313-1450 on September 10th, 2004.

Denise Goldinger, Sec'y to Mark C. Terzola

Sir:

Now come applicants, through their undersigned counsel, and submit herewith a Fee Transmittal Form, showing the Deposit Account No. (500959) of Applicant. You are hereby authorized to charge any fees associated with this communication to Deposit Account No. 500959 (067920-1217RE). A duplicate copy of this page is included for such purposes. Also submitted herewith is a copy of the Notice to File Missing Parts of Reissue Application mailed August 18, 2004.

Respectfully Submitted,

Mark C. Terzola, Reg. No. 40,201
Roetzel & Andress
222 South Main Street
Akron, Ohio 44308
Telephone: (330) 376-2700
Attorney for Applicants

September 10, 2004
067920.1217/1198658 1



Confirmation No. 4213

CERTIFICATE OF MAILING

I hereby certify that the following correspondence was deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on September 10th, 2004.

1450, Alexandria, VA 22313-1450 on September 10th,
2004.

Denise Goldinger
Denise Goldinger, Sec'y to Mark C. Terzola

Enclosed are the following documents:

Response to Notification of Missing Parts of Reissue Application

Copy of Notification of Missing Parts of Reissue Application

Fee Transmittal Form

Return Receipt Postcard

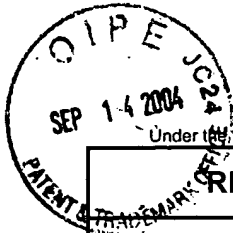
The Director is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 500959 (067920-1217RE).

Respectfully Submitted,

Mark C. Terzola, Reg. No. 40,201
Roetzel & Andress
222 South Main Street
Akron, Ohio 44308
Telephone: (330) 376-2700
Attorney for Applicants

September 10, 2004

067920.1217/1198701 1



PTO/SB/56 (04-04)

Approved for use through 04/30/2007. OMB 0651-0033

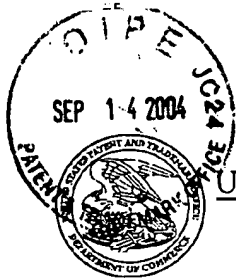
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 067920.1217.RE		
Claims as Filed – Part 1								
	(1) Claims in Patent	(2) Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
Total Claims (37 CFR 1.16(j))	(A) 5	(B) 14	**** 0 =	x \$ N/A =		or	x \$ 0 = 0.00	
Independent claims (37 CFR 1.16(i))	(C) 1	(D) 3	* 2 =	x \$ N/A =			x \$ 86.00 = 172.00	
Basic Fee (37 CFR 1.16(h))					\$ _____		\$ 770.00	
Total Filing Fee					\$ _____	OR	\$ 1072.00	
Claims as Amended – Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$ _____ =		x \$ _____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ _____ =		x \$ _____ =	
Total Additional Fee					\$ _____	OR	\$ _____	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> Please charge Deposit Account Number <u>50-0959</u> in the amount of <u>1,072.00</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account Number <u>50-0959</u>. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of \$ _____ to cover the filing/additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p><u>9/10/04</u> Date 40,201 Registration Number, if applicable</p> <p><u>Mark C. Terzola</u> Signature of Applicant, Attorney or Agent of Record Mark C. Terzola Typed or printed name</p>								

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



JFW

UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
United States Patent and Trademark Office
Address: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450
www.uspto.gov

APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/797,931	03/10/2004	Jack T. Bevington	067920-1217

Mark C Terzola
Roetzel & Andress
222 South Main Street
Akron, OH 44308

CONFIRMATION NO. 4213

FORMALITIES LETTER

OC000000013575322

OC000000013575322

09/15/2004 CNGUYEN 00000034 500959 10797931

Date Mailed: 08/18/2004

01 FC:1004 770.00 DA
02 FC:1204 172.00 DA
03 FC:1051 130.00 DA

NOTICE TO FILE MISSING PARTS OF REISSUE APPLICATION

Filing Date Granted

An application number and filing date have been accorded to this reissue application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 770 to complete the basic filing fee for a non-small entity. If appropriate, applicant may make a written assertion of entitlement to small entity status and pay the small entity filing fee (37 CFR 1.27).
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.

The applicant needs to satisfy supplemental fees problems indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Additional claim fees of \$172 as a non-small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

SUMMARY OF FEES DUE:

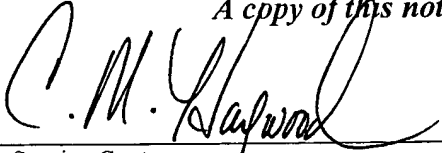
Total additional fee(s) required for this application is **\$1072** for a Large Entity

- \$770 Statutory basic filing fee.
- \$130 Late oath or declaration Surcharge.
- Total additional claim fee(s) for this application is **\$172**
 - \$172 for 2 independent claims over the original patent.

Replies should be mailed to: Mail Stop Missing Parts

Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

*A copy of this notice **MUST** be returned with the reply.*



Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 1 - ATTORNEY/APPLICANT COPY

